



NOTICE OF APPEAL FROM THE EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

AF
2665

Applicant: David Barach

Serial No.: 09/532,988 Group: 2665

Filed: March 22, 2000 Examiner: Ryman, Daniel J.

Confirmation No.: 8379

For: An Efficient Method for Collecting Statistics Via A Half-Duplex Serial Bus

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
March 3, 2005	Elaine Leahy
Date	Signature
Elaine Leahy	
Typed or printed name of person signing certificate	

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated November 4, 2004 of the Examiner finally rejecting claims 1-40. The item(s) checked below are appropriate:

- ☒ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated November 4, 2004 for one month from February 4, 2005 to March 4, 2005.
- ☐ A month extension of time to respond to the Office Action Made Final dated was filed on with payment of a \$ fee.
☐ Applicant hereby petitions for an additional month extension of time to respond to the Office Action Made Final.
- ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

03/08/2005 HAL111 00000045 09532980 500.00 OP 120.00 OP
01 FC:1401
02 FC:1251

4. Fees are submitted for the following:

<input checked="" type="checkbox"/> Extension of Time for one month	\$ 120
<input type="checkbox"/> Additional Extension of Time:	
Fee for Extension ([] mo.)	\$ _____
Less fee paid ([] mo.)	- \$ _____
Balance of fee due	\$ 0
<input checked="" type="checkbox"/> Notice of Appeal	\$ 500
<input type="checkbox"/> Other _____	\$ _____
TOTAL	\$ 620

5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$620 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

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Date: 3/3/05